June 2011 Form must be Typed Form must be signed

TEMPORARY ABANDONMENT WELL APPLICATION All blanks must be complete

OPERATOR: License# _____ API No. 15-Spot Description: ___ _ - ___ - ___ Sec. ____ Twp. ____ S. R. ___ 🗌 E 🦳 W Address 1: _____ feet from N / S Line of Section Address 2: _____ feet from E / W Line of Section ______ State: _____ Zip: _____ + __ _ _ _ _ GPS Location: Lat: _______, Long: _______, (e.g. xxxxxxxx) Contact Person: ___ Datum: NAD27 NAD83 WGS84 Phone:(_____) ___ ____ GL KB _____ Elevation:____ Lease Name: ___ Contact Person Email: ___ Well Type: (check one) Oil Gas OG WSW Other: Field Contact Person: ____ Field Contact Person Phone: (_____) ____ Gas Storage Permit #:____ Spud Date: ___ ___ Date Shut-In: __ Tubing Conductor Surface Production Intermediate Liner Size Setting Depth Amount of Cement Top of Cement **Bottom of Cement** Casing Fluid Level from Surface:_____ ___ How Determined? ____ Casing Squeeze(s): _____ to ____ w / ____ sacks of cement, ____ to ____ w / ____ sacks of cement. Date: ___ Do you have a valid Oil & Gas Lease? Yes No Depth and Type:

Junk in Hole at _____ Tools in Hole at _____ Casing Leaks:
Yes No Depth of casing leak(s): _____
Type Completion:
ALT. I ALT. II Depth of:
DV Tool: _____ w / _____ sacks of cement
Port Collar: _____ w / ____ sack of cement

Geological Date:

Packer Type: ___

Total Depth:

__ Size: ___

__ Plug Back Depth: ___

Formation Name Formation Top Formation Base Completion Information ___ At: _____ to _____ Feet Perforation Interval ____ ____to_____ Feet or Open Hole Interval _____ to _____ Feet _____ At: _____ to _____ Feet Perforation Interval _____ to ____ Feet or Open Hole Interval ____

__ Inch Set at: ___

___ Plug Back Method: ___

TV OF DED HIDV I HEDERY ATTEST THAT THE INFORMATION CONTAINED HEDEIN IS TRUE AND CORRECT TO THE BEST OF MY KNOW! EDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested:	Results:	Date Plugged:	Date Repaired:	Date Put Back in Service:
Review Completed by:		Comments:			
TA Approved: Yes De	nied Date:				

Mail to the Appropriate KCC Conservation Office:



Conservation Division District Office No. 2 3450 N. Rock Road Building 600, Suite 601 Wichita, KS 67226



Phone: 316-630-4000 Fax: 316-630-4005 http://kcc.ks.gov/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner

December 09, 2015

R. A. (Dick) Schremmer Bear Petroleum, LLC PO BOX 438 HAYSVILLE, KS 67060-0438

Re: Temporary Abandonment API 15-035-19455-00-00 SU-BOGNER 2 NW/4 Sec.24-31S-05E Cowley County, Kansas

Dear R. A. (Dick) Schremmer:

"Your temporary abandonment (TA) application for the well listed above has been approved. In accordance with K.A.R. 82-3-111 the TA status of this well will expire 12/09/2016.

- * If you return this well to service or plug it, please notify the District Office.
- * If you sell this well you are required to file a Transfer of Operator form, T-1.
- * If the well will remain temporarily abandoned, you must submit a new TA application, CP-111, before 12/09/2016.

You may contact me at the number above if you have questions.

Very truly yours,

Duane Krueger"